

CLAIMS ONLY						Application Number	Filing Date	
						10/629002		
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend		
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50								
Total Indep	6							
Total Depend								
Total Claims	7							